PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



			or <u>Fax</u>	(703) 746-4000		- (
appropriate. All further con	rrespondence including the l below or directed otherwise	Patent, advance or	ders and notification	on of maintenance fees	uired). Blocks 1 through 5 s will be mailed to the current s; and/or (b) indicating a sepa	correspondence address as
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying		
23373 7590 02/11/2005				papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
SUGHRUE MION, PLLC 2100 PENNSYLVANIA AVENUE, N.W. SUITE 800 WASHINGTON, DC 20037 MAY			I hereby certify that the States Postal Service addressed to the Mai transmitted to the USF		rtificate of Mailing or Transmission his Fee(s) Transmittal is being deposited with the United with sufficient postage for first class mail in an envelope il Stop ISSUE FEE address above, or being facsimile PTO (703) 746-4000, on the date indicated below.	
		B	2 (100)			(Depositor's name)
		TA.	at of			(Signature)
	TRA	PADEMART		(Date)		
APPLICATION NO.	FILING DATE		FIRST NAMED INV	ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/849,377	05/04/2001	Alan Roeder		eron	SVL920010038US1	1988
APPLN, TYPE	SMALL ENTITY	Icorie E		NUMBER OF THE PROPERTY OF THE	TOTAL PERSON DUE	2.000.000
	1	ISSUE F		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional NO		\$1400		\$300	\$1700	05/11/2005
EXAMINER		ART UNIT		CLASS-SUBCLASS	_	
CAO, I	DIEM K	2126		719-310000		
 Change of correspondence address or indication of "Fee Address" (CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custom Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
PLEASE NOTE: Unless recordation as set forth in	n 3/ CFR 3.11. Completion	elow, no assignee of this form is NO	data will appear or T a substitute for fil	n the patent. If an assiging an assignment.	nee is identified below, the d	
(A) NAME OF ASSIGN	(B) RESIDENCE: (C	ITY and STATE ORICO	01 FC:1501	1400.00	
International Business Machines Corporation		Armonk, New York		02 FC:1504	300.00	
Please check the appropriate	e assignee category or catego	ories (will not be pr	inted on the patent)	: 🗖 Individual 🖫	Corporation or other private gr	oup entity Government
4a. The following fee(s) are	enclosed:	46	Payment of Fee(s			
Issue Fee	small entity discount permitte	ad)	A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached.			
Publication Fee (No small entity discount permitted) Advance Order - # of Copies			Prayment by credit card. Form P10-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to			
			Deposit Account	Number	(enclose an extra c	opy of this form).
	(from status indicated above MALL ENTITY status. See	,	☐ b. Applicant is	no longer claiming SMA	ALL ENTITY status. See 37 C	FR 1.27(g)(2).
The Director of the USPTO NOTE: The Issue Fee and F interest as shown by the rec	is requested to apply the Issu Publication Fee (if required) vords of the United States Pate	ue Fee and Publica will not be accepted ent and Trademark	tion Fee (if any) or I from anyone other Office.	to re-apply any previous than the applicant; a re	sly paid issue fee to the applica gistered attorney or agent; or the	ation identified above. he assignee or other party in
Authorized Signature	Schlant	M S		Date	April 15, 2005	
Typed or printed name				Registratio	n No. 39,283	
This collection of information an application. Confidential submitting the completed as	on is required by 37 CFR 1.3 lity is governed by 35 U.S.C	11. The information. 122 and 37 CFR	on is required to obt	ain or retain a benefit by	the public which is to file (and minutes to complete, including comments on the amount of ti	d by the USPTO to process) ng gathering, preparing, and

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.